

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000021695

FILED
Apr 29, 2009
Secretary of State

Entity Name: GRIFFIN NOTES & INVESTMENTS, INC

Current Principal Place of Business:

218 E. BEARSS AVE., #378
TAMPA, FL 33613

New Principal Place of Business:

14964 OLD POINTE ROAD
TAMPA, FL 33613

Current Mailing Address:

218 E. BEARSS AVE., #378
TAMPA, FL 33613

New Mailing Address:

FEI Number: 26-2030918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, CHARLES
14964 OLD POINTE RD.
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIFFIN, CHARLES
Address: 218 E. BEARSS AVE., #378
City-St-Zip: TAMPA, FL 33613

Title: V () Delete
Name: GRIFFIN, ELIZABETH
Address: 218 E. BEARSS AVE., #378
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES GRIFFIN

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date